

10/613370
Application or Docket Number
02275

PATENT APPLICATION FEE DETERMINATION RECORD
Effective January 1, 2003

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	20	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	20 minus 20 =	* 0
INDEPENDENT CLAIMS	3 minus 3 =	* 0
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE ☐ OR

OTHER THAN SMALL ENTITY

RATE	FEE		RATE	FEE
BASIC FEE	375.00	OR	BASIC FEE	750.00
X\$ 9=		OR	X\$18=	
X42=		OR	X84=	
+140=		OR	+280=	
TOTAL	375	OR	TOTAL	

CLAIMS AS AMENDED - PART II

2.28.05

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* 24	Minus ** 20	= 4
Independent	* 4	Minus *** 3	= 1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$ 9=	100	OR	X\$18=	
X42=	100	OR	X84=	
+140=		OR	+280=	
TOTAL ADDIT. FEE	200	OR	TOTAL ADDIT. FEE	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$ 9=		OR	X\$18=	
X42=		OR	X84=	
+140=		OR	+280=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$ 9=		OR	X\$18=	
X42=		OR	X84=	
+140=		OR	+280=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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CERTIFICATE OF TRANSMISSION

I hereby certify that this correspondence is being sent by facsimile addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450 at Fax No.: 1-703-872-9306 on:

Date: February 28, 2005 Signature: *Charles F. Meroni, Jr.* Signed By: Charles F. Meroni, Jr.

PATENT
Our Case No. 02275

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Tsekhanovsky et al.)	
Serial No.:	10/613,370)	Art Unit: 3677
Filed:	July 3, 2003)	Examiner: Jackson, A.
For:	Automatic Sliding Door Closure Device)	

TO:
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT A

In response to the Office Action dated November 30, 2004, please amend the application as follows:

Amendments to the Specification: Begin on page 2 of this paper.

Amendments to the Claims: Reflected in the listing of claims beginning on page 4 of this paper.

Amendments to the Drawings: Begin on page 10 of this paper and include both an attached replacement sheet and an annotated sheet showing changes.

Remarks/Arguments: Begin on page x of this paper.

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